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- (C) Operative report;
- (D) Gastroenterology consultation report;
- (E) Oncology summary or consultation report;
- (iv) Report of one of the following radiographic studies:
 - (A) Ultrasonography;
- (B) Endoscopic retrograde cholangiography;
 - (C) Percutaneous cholangiography;
- (D) Computerized tomography (CT) scan:
- (v) Death certificate, provided that it is signed by a physician at the time of death.
- (11) Cancer of the gall bladder. (i) Pathology report of tissue from surgical resection;
 - (ii) Autopsy report;
- (iii) Report of one of the following radiological studies:
- (A) Computerized tomography (CT) scan:
- (B) Magnetic resonance imaging (MRI);
- (C) Ultrasonography (ultrasound);
- (iv) One of the following summary medical reports:
 - (A) Physician summary report;
- (B) Hospital discharge summary report:
- (C) Operative report;
- (D) Radiotherapy report;
- (E) Oncology summary or report;
- (v) Death certificate, provided that it is signed by a physician at the time of death.
- (12) Cancer of the liver. (i) Pathology report of tissue biopsy or surgical resection;
 - (ii) Autopsy report;
- (iii) One of the following summary medical reports:
 - (A) Physician summary report;
- (B) Hospital discharge summary report;
 - (C) Oncology summary report;
 - (D) Operative report;
 - (E) Gastroenterology report;
- (iv) Report of one of the following radiological studies:
- (A) Computerized tomography (CT) scan;
- (B) Magnetic resonance imaging (MRI):
- (v) Death certificate, provided that it is signed by a physician at the time of death.

§ 79.27 Proof of no heavy smoking, no heavy drinking, no heavy coffee drinking, and no indication of disease.

- (a) If the claimant or eligible surviving beneficiary is claiming eligibility under this subpart for primary cancer of the esophagus, stomach, pharynx, pancreas, or liver, the claimant or eligible surviving beneficiary must submit in addition to proof of the disease, all medical records listed below from any hospital or medical facility that were created within the period six (6) months before and six (6) months after the date of diagnosis:
- (1) All history and physical examination reports:
 - (2) All operative reports;
 - (3) All pathology reports;
- (4) All physician or hospital discharge summaries.
- (b) If the medical records listed above, or the medical records possessed by the state cancer or tumor registry, contain information reflecting that the claimant was a heavy smoker or a heavy drinker, or establish that there was an indication of disease, the Radiation Exposure Compensation Unit will notify the claimant or eligible surviving beneficiary and afford that individual the opportunity to submit other written medical documentation or contemporaneous records to establish that the claimant was not a heavy smoker, not a heavy drinker, or that there was no indication of disease, in accordance with the provisions of §79.52(b).
- (c) In the case of primary cancer of the pancreas, the claimant or each eligible surviving beneficiary shall execute and provide an affidavit (or declaration under oath on the standard claim form) that sets forth the amount of regular or decaffeinated coffee that the claimant consumed on average per day for the twenty year period immediately prior to the date the claimant was diagnosed with primary cancer of the pancreas.

Subpart D—Uranium Miners

§ 79.30 Scope of subpart.

The regulations in this subpart define the eligibility criteria for compensation under section 5 of the Act, and the type and extent of evidence

that will be accepted as proof of the prescribed criteria. Section 5 of the Act provides for a payment of \$100,000 to individuals who contracted lung cancer or one of a limited number of non-malignant respiratory diseases following exposure to defined minimum levels of radiation during employment in a uranium mine or uranium mines in certain states during the period beginning January 1, 1947, and ending December 31, 1971.

§ 79.31 Definitions.

- (a) Employment in a uranium mine means any mining-related activity at a uranium mine that principally occurred underground. These activities/ occupations include, but are not limited to: miner, miner's helper (nipper), production driller, long hole driller, tram operator (trammer, or motorman), equipment operator (mucker), slusher operator (slusherman), laborer (bull gang), powderman, timberman, hoistman, skip tender, underground truck driver (trucker), shift foreman (boss, shifter, or leadman), mechanic, electrician, geologist, surveyor, surveyor's helper (rodman), grade controller (prober), air sampler, safety engineer, and mine superintendent (super). Noncompany personnel performing the following activities/occupations include, but are not limited to: mine inspectors, health physicists, and Atomic Energy Commission (AEC) geologists and engineers.
- (b) *Uranium mine* means an underground excavation, regardless of the means of access, the primary or significant purpose of which was the extraction of uranium ore. Strip, rim, or open pit mines are excluded.
- (c) Working Level means any concentration of the short half-life daughters of radon that will release 1.3×10^5 million electron volts of alpha energy per liter of air;
- (d) Working Level Month means radiation exposure at the level of one working level every work day for a working month (170 hours), or an equivalent cumulative exposure over a greater or lesser amount of time.
- (e) Non-smoker means an individual who never smoked tobacco cigarette products or smoked less than the amount defined in paragraph (f), below.

- (f) *Smoker* means an individual who has smoked at least one (1) pack year of cigarette products.
- (g) Onset or incidence means the date the disease was first diagnosed by a physician.
- (h) *Primary lung cancer* means any physiological condition of the lung, trachea, and bronchus that is recognized under that name or nomenclature by the National Cancer Institute. The term excludes cancers *in situ*.
- (i) *Nonmalignant respiratory disease* means any of the following:
- (1) Pulmonary fibrosis, fibrosis of the lung, or
- (2) Cor pulmonale related to fibrosis of the lung, or
- (3) Moderate or severe silicosis or pneumoconiosis, provided that the claimant, whether an Indian or non-Indian,
- (i) Worked in a uranium mine or mines located on or within an Indian Reservation, and
- (ii) Worked in such a mine or mines for a period of time sufficient to meet the minimum working level criteria for the claimant set forth in §79.32(c).
- (j) Fibrosis of the lung or pulmonary fibrosis for purposes of the Act and these regulations means chronic inflammation and scarring of the pulmonary interstitium and alveoli with collagen deposition and progressive thickening causing pulmonary impairment.
- (k) Cor pulmonale means heart disease, including hypertrophy of the right ventricle, due to pulmonary hypertension secondary to fibrosis of the lung.
- (l) *Silicosis* means a pneumoconiosis due to the inhalation of the dust of stone, sand, flint or other materials containing silicon dioxide, characterized by the formation of pulmonary fibrotic changes.
- (m) Pneumoconiosis means a chronic lung disease resulting from inhalation and deposition in the lung of particulate matter, and the tissue reaction to the presence of the particulate matter. For the purposes of this Act, the claimant's exposure to the particulate matter that led to the disease must have occurred during employment in a uranium mine.
- (n) *Indian Reservation* means territory held in trust by the United States